Substitute for form 1449/PTO (Revised 07/2005)					Complete if Known							
					Application Number		10/797,938					
					Filing Date		03/11/2004					
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)					First Named Inventor		Svenson et al.					
					Group Art Unit		1623					
					Examiner Name		Everett White					
Sheet	1		of	1	Attorney Docket Number		046088/267693					
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U. S. PATENT DOCUMENTS												
Examiner Initials*	Cite No.	Document Number  Number – Kind Code (if known)		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document		Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear					
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Examiner	/Everett White/	Date	08/21/2006
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<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.